

One of the reasons this is being done is because those on the left do not like private competition for the government program, Medicare. What I think they fail to appreciate is what my constituents have appreciated, which is this private alternative to regular Medicare provides additional benefits, additional health protections. If they are willing to pay a little bit more for those benefits, why shouldn't they be allowed to take advantage of those benefits? No. Those on the left say: We don't want any private insurance companies competing to get Medicare patients. We want that to be strictly a government program.

Well, if folks like it, why shouldn't they be allowed to keep it? Remember what the President said: If you like your insurance company, you get to keep it. No, that is not true, according to this. Medicare Advantage enrollment will plunge from 13.2 million to 4.7 million because of the "less generous benefit packages." So I guess it is not true: If you like it, you get to keep it.

The Washington Post—a newspaper here in Washington—wrote an article about the Center for Medicare and Medicaid Services report, the same one I have been quoting here, and the headline was "Bill Would Reduce Senior Care." Well, that says it in a nutshell. The story goes on to tell us: "A plan to slash . . . Medicare spending—one of the biggest sources of funding for President Obama's proposed overhaul of the nation's healthcare system—would sharply reduce benefits for some senior citizens."

"Would sharply reduce benefits." So the Medicare cuts, as proposed by the majority, do, in fact, jeopardize seniors' benefits. The majority leader says we can amend the bill, and that is hypothetically correct, of course.

Let's see how many of our Democratic colleagues are willing to join Republicans in striking these Medicare cuts, the cuts I have just now been referring to. If we do not do that, then I will repeat what I have said before, which is that we should start over because it is clear this bill is not going to be fixed and starting over would mean taking some of the Republican suggestions.

Let me talk about one of these suggestions. My colleague from Florida was talking about the sorry state of real estate in his State of Florida, and I could have added my State of Arizona as well. I agree with much of what he had to say about that. But he also noted, with regard to health care, there is a subsidy in what those of us with private insurance pay because of the care that is given to others who cannot always pay for all of it. That is true.

I would add, there is also a subsidy for what we pay in insurance premiums because of the government programs, such as Medicare and Medicaid, which, likewise, do not pay for all the benefits they provide. In fact, they only pay doctors and hospitals somewhere in the

neighborhood of 70 to 80 percent of their cost, and we have to make up the difference in that in the private insurance premiums we pay. So increasing insurance premiums is, to a large degree, the fault of the U.S. Government, not the insurance companies.

The Democrats say the answer is yet another government program, and they even have a government insurance program in the legislation they have introduced. Their other answer is to write insurance policies. They actually specify in the bill what policies have to include. These are called government mandates. What is the effect of these proposals? Is this the right way to go or is there a better idea?

Again, the Congressional Budget Office, which the distinguished minority leader referred to a moment ago, in its most recent report said—and it said the same thing to the Finance Committee—the premiums for private insurance under this Democratic legislation will, what, go up. The average family is going to pay more in insurance premiums under this legislation, not less.

What was the whole idea here? The whole idea of health care reform was to reduce the cost of health care, to reduce our insurance premiums. They are skyrocketing. My colleagues on the other side of the aisle say: Small businesses cannot afford to buy insurance for their employees; my constituents cannot afford their health insurance premiums, which are increasing in price. All that is true. They are increasing. So what should we be doing? We should be lowering them, not raising them. This legislation, according to the Congressional Budget Office, increases insurance premiums.

What about the Republican alternative, the alternative that was presented in the House of Representatives by the House Republicans? That alternative, according to the Congressional Budget Office, reduces average insurance premiums by \$5,000 a year. So on the one hand, you have the Democratic proposal, which increases insurance premiums; on the other hand, you have the Republican proposal, which decreases premiums.

There is a study by a private consulting firm, Oliver Wyman, which breaks this down by State. The reason I am excited about this Republican idea is the average family in Arizona would see its premiums go down annually by over \$7,400. So think about that. On the one hand, you have insurance premiums going up, under the Democratic legislation; under the other, you have insurance premiums going down, on average, somewhere in the neighborhood of anywhere from \$3,300 to, in my State, up to \$7,400. I think the average is somewhere between \$3,000 and \$5,000.

The point is, you can cut insurance premiums with better ideas coming from Republicans, and I just ask my colleagues: Why wouldn't you do that as opposed to the complicated, costly,

government-run kind of program you are trying to institute under this legislation, which, according to CBO, would raise insurance premiums?

That is why the American people, by a significant margin, say: Do not pass this bill, why they appreciate it would raise their costs, it would reduce the quality of their health care, and why, therefore, my colleagues and I are going to try our best to persuade our Democratic colleagues to amend the bill. But if at the end of the day they are not willing to buy some of these good Republican ideas and instead insist on pushing right ahead with their legislation, at the end of the day, we will have to say: We are sorry, it does not appear this bill is going to be fixed and, therefore, we are going to follow the wishes of the American people and see to it that it does not pass.

I suggest the absence of a quorum.

The ACTING PRESIDENT pro tempore. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. REID. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

ORDER OF PROCEDURE

Mr. REID. Mr. President, the Senator from Minnesota is here. She has a brief statement to make. I ask unanimous consent that she be allowed to speak for 5 minutes and then we go to the bill.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

The Senator from Minnesota.

DETENTION IN IRAN

Ms. KLOBUCHAR. Mr. President, I come to the floor to call attention to the situation of three citizens of the United States—Shane Bauer, Sarah Shourd, and Josh Fattal—who have been detained by the Government of Iran for nearly 4 months. One of these individuals, Shane Bauer, comes from my home State of Minnesota, and so the safe return of these three young Americans is of particular importance to me.

On July 31 of this year, Shane, Sarah, and Josh—who shared a common passion for travel and discovery—were on a hiking trip in a peaceful region in northern Iraq, when they reportedly accidentally strayed across the poorly marked border between Iraq and Iran and were surrounded by Iranian border guards.

Since then, Shane, Sarah, and Josh have been held in near isolation in a Tehran prison and have been allowed no contact with their families in the United States.

Despite repeated requests by the Swiss Government, which represents U.S. interests in Iran, the three have